## Mountain High Snowsport Club 2017/2018 Membership Sign-Up / Dough Transmittal Form

For all Mt. High activities, make check payable to: "Mountain High Snowsport Club" Mail it to: Mountain High Snowsport Club, PO Box 2182, Portland, OR 97208.

Name(s):	PLEASE PRINT CLEARLY	[ ] New membership(s)	
Mailing Address:			
	Birth	Birthday: (MM/DD)	
Phone (H):	Phone (W):		
E-mail (H):	E-mail (W):		
Email Preferences:  1. Newsletter (once a mode) 2. Club news & events (once a mode) 3. Other ski news (NWS) 4. Is it OK to share your	] phone (home/work) [ ] e-mail (home/work) [ ] No changes, same as last year.  nth): [ ] Yes, link only [ ] Yes, complete (between newsletters): [ ] Yes [ ] No CC, FWSA, ski areas, etc.): [ ] Yes [ ] No remail address with other club members' PACRAT email from their team captain regardless	e file []No ? []Yes []No	
Please apply my payment towa  Annual Membership (Oct. 1, -	ard the following fun stuff: - Sept. 30): Single (\$30); Couple (\$50).	Total Details/Notes	
☐ PACRAT Racing (2017/18) \$11	0 for the season. <b>Team name</b> :	\$	
☐ Mt. Shasta & Mt. Ashland bus	trip (Jan. 5-7, 2018). REPLACED by Mt. Baker	trip.	
Prices: Adult=\$300, Senior(65+)	)=\$290, Super senior(70+)=\$260, w/o lift tix=\$2	248.\$	
☐ Mt. Baker & Alpental/Snoqual	lmie bus trip (Jan. 5-7, 2018). Weekend trip.		
Adult=\$344, Senior(60 - 69)=\$3	336, Super senior(70+)=\$271, w/o lift tix=\$220.	\$	
Prices: Adult=1099, Senior=104 * Upgrade to condo at Snowbii * Extra lift ticket at Silver Star (ii	-27, 2018). Weeklong Canada trip. Deposit = \$2 45, W/Fusion pass=899, Senior Fusion=880 rd Lodge (Silver Star) = Add \$100	\$	
_	, 2018) 4-day trip. Deposit=\$150.		
	)=\$365, Without lift tickets=\$310		
☐ Other:		\$	
[ ] cash [	] check # TOTAL AMOUNT RECEIVED:	\$	
Comments (For whom you are paying	g. Roommate requests, Options, Preferences, etc.):		
Signature:	Date:		
Signature:	Date:		

See our Trips cancellation policy at: <a href="https://www.mthigh.org/Documents/Trip-Cancellation-Policy.pdf">www.mthigh.org/Documents/Trip-Cancellation-Policy.pdf</a>

## Mountain High Snowsport Club Liability Release

I acknowledge that I am responsible for my own safety and conduct. I hereby agree to be bound by all Mountain High Snowsport Club bylaws and regulations, including the Trip Cancellation Policy. I hereby release Mountain High Snowsport Club, and any of their agents (officers, directors, trip captains, and any other Club representatives) from any and all liability for personal injury, for damage to or loss of personal property, sickness or injury from whatever source, legal entanglements, imprisonment, loss of money, or death, which might occur while participating in any club related activity.

Furthermore, I agree to indemnify and hold the Club and any of their agents harmless from any and all liabilities of any kind which may be incurred or asserted against the Club or any of their agents in any way relating to my negligence or willful misconduct connected with my participation in the club's activities.

Specifically, I release said persons from any liability or responsibility for my physical condition, for the condition or selection of itinerary or course route and for the presence or actions of any other participants. I am aware of the risks of participation, which include, but are not limited to, getting separated from the group and getting lost, colliding with other participants, getting injured in any way relevant to the activity, or suffering from any conditions resulting from exposure to nature, animals, and/or human beings.

I hereby state that I am in sufficient physical condition to accept a rigorous level of physical activity. I understand that participation in club events is strictly voluntary and I freely chose to participate. I confirm that I will be responsible for any medical costs I may incur as a result of my participation.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT. I FULLY UNDERSTAND ITS TERMS. I UNDERSTAND THAT I HAVE GIVEN UP ALL LEGAL RIGHTS BY SIGNING IT. I SIGN IT VOLUNTARILY WITHOUT ANY SIGNS OF DURESS.

NAME(PRINTED)	SIGNATURE (Participant or guardian)	DATE	CELL PHONE
EMERGENCY CONTACT N	IAME:		
			PHONE
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EMERGENCY CONTACT N	IAME:		
			PHONE